				, U.Š. PE	App atent and Trade	roved for use the mark Office; U.S	rough 12/	1/200B.	OMB 0	651-0035 651-0035
Under the Paper	rwork Redi	uction Act of 1995, no persons are mo	uired to respon	O TO THE COM	COOK OF INVOLUME	DON EINIOSS IT OF	Pays a v	ard OW	ortngo E	number
BOW	Application Number Filing Date			10/594354						
POWER OF ATTORNEY			First Named Inventor			<u>September 26, 2006</u>)6
and CORRESPONDENCE ADDRESS INDICATION FORM			Title			Steven Hepworth				
			Art Unit			Gripping Apparatus				
(M)	Examiner Name						<u>:</u>	<u> </u>		
	Attorney Docket Number			2283/15451						
Lberehy revoke	all prev	ious powers of attorney give	ea in the	abovo in	Contidient on	_!!!!				
I hereby appoint	_	one pencis or automos gre	CU WI LING &	SWOVE NO	terraneo ap	plication.				
L									*.	
Practitioners associated with the Customer Number:										
OR		· ·	-							
Practitioner(s)	named b	elaw:	•					•		
		Name			Regit	stration Numb	er			7
Audrey A. Mill	Audrey A. Millemann									
						44,942		·		-
										4
					***************************************					-
as my/our attorney(s) Trademark Office con	or agent	(s) to prosecute the application id	entified abov	e, and to	transact all bu	isinesa in the	United S	tales P	etent a	nd _
				<u> </u>			· w			
Please recognize or o	change th	e correspondence address for the	e above-iden	tifled appl	kcation to:					
The address	s associa	ted with the above-mentioned Cu	stomer Numt	ber:						
OR		. Г								
The addres	a associa	iled with Customer Number:	•							
OR										
Firm or Individua	i Name	Audrey A. Millemann		•						
Address		Weintraub Genshiez Chediak 400 Capitol Mall, 11th Floor								
City		Sacramento		State	CA	· .	ZIp 98	814		
Country		us			<u></u>					
Talephone		916-558-6033		Emali	amillemann@	weintraub.co	m			
i am the:										- '
Applicant/Inv							•			J
Assignee of	record of	the entire interest. See 37 CFR 8 FR 3.73(b) is enclosed. (Form P1	.71,		:					
	1001 01 0		oplicant or A	a signed	of Percent		٠	ـ نو		
Signature	1	Contract of the second				Date	(Mar	<u>CU 1</u>		2007
Name	Steven	dhowde	 		·	Telephone	111/	2_	, 20	97.
Title and Company										$\neg \neg$
NOTE: Signatures of all II signature is required, see	he invento: below*,	rs or sasigness of record of the entire	interest or then	represent	upen entil (#) eville	ired. Submit mo	ultiple form	ne if mor	e than o	ne
Tolal of 3		forms are submilled,						·		一
to complete, including ga comments on the amoun U.S. Patent and Tradem	thering, pr t of time y ark Office,	ired by 37 CFR 1.31, 1.32 and 1.33. ion. Confidentially is governed by 3 equilibrium, and submitting the complete ou require to complete this form and/ U.S. Department of Commano, 9,0 DTO: Commissioner for Patent	sppResson k or suggestions D. Box 1450,	and 37'CFF orm to the 1 For reducin Alexandria	13770. Time v 15870. Time v 19 ihla burden, 14. 22313-141	o, This collection will vary depend should be sent 50. DO NOT (ing upon	haled to	take 3 r	minutas 188. Any

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

19164461611

		Nia a	Approved for use through	12/31/2008, OMB 0651-003:					
Under the Paperwork Re	duction Act of 1995, no persons are re-	Shahe in temboun to a collection of luic	ademark Office; U.S. DE <i>l</i> <u>xmetion unless</u> it displays	PARTMENT OF COMMERCE					
(Application number	10/59435	10/594354					
POWER	OF ATTORNEY	Filing Oato	September 26, 2006						
and		First Named Inventor	Steven Hepworth						
CORRESPON	DENCE ADDRESS	Title	Gripping Apparatus						
•	TION FORM	Art Unit							
· ·		Attorney Docket Number	14000045154						
		Automoy Bocket Number	12283/15451						
I hereby revoke all pre	vious powers of attorney gl	ven in the above identified	application.						
I hereby appoint:									
l □		ĺ	1						
1 '"	ied with the Customer Number:	•	Ì						
OR	•	L	- 						
Practitioner(s) named	Lhelmur								
r racinioriar(a) name.	i below,								
	Name	Registration Number							
Audrey A. Millemann			44,942						
			77,076						
ļ <u></u>									
) 									
as mylour attornay/s) or and	mi(s) to prosper de the application	Identified above, and to transact a	il business in the Unite	ed States Cated and					
Trademark Office connected	therewith.		44341622 III II M. OIII/6	io orales catent birb					
OR	dated with Customer Number:								
Firm or Individual Name	Audrey A. Millemann								
Address	Weintraub Genshlea Chediak 400 Capitol Mail, 11th Ploor								
City	Sacramento	State CA	. Zip	95814					
Country	US								
Telephone	916-558-6083	Ernall amiliema	กก@weintraub.com						
	of the entire interest. See 37 CFR CFR 3.73(b) is enclosed. (Form F								
	SIGNATURE of	Applicant or Assignee of Record	1 (M=	rch 11, 2007)					
Signature	Aller of		Date						
Name Arthur	Sharp		Telephone	11 -3 . 2007					
Title and Company	·								
NOTE: Signatures of all the inventigeature is required, see below".	ntors or assigness of record of the entire	e interest or their representative(s) are	required. Submit multiple	forms if more than one					
*Total of 2	_ forms are submitted.								
to complete, including gathering, comments on the amount of time U.S. Patent and Trademark Offi-	pation. Controvalidity is governed by propering, and submitting the complet by you require to complete this form and so, U.S. Department of Commerce. P	D. The knormation is required to obtain 33 (ii.6.C. 122 and 37 CFR 1.11 and 33 (ii.6.C. 122 and 37 CFR 1.11 and 30 application from the USPTO. Ti d'or suggestions for reducing this burd 1.0. Box 1450, Alexandris, V. 123. P.O. Box 1450, Alexandris, V.	1.14. This collection is a me will vary depending using the sant to the sant t	estimated to take 3 minutes. Ipon the individual case. Am					

If you need assistance in complating the form, call 1-800-PTO-9199 and select option 2. $\,\,\cdot\,\,$